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**APPLICANTS**

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*m.p.* \*\* CONTINUING DATA \*\*\*\*\* *now*

*m.m.* \*\* FOREIGN APPLICATIONS \*\*\*\*\* *now*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 08/24/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY ID	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		8	26	9
Verified and Acknowledged	<i>[Signature]</i>	Examiner's Signature	Initials		

**ADDRESS**

22879

**TITLE**

Defective data site information storage

FILING FEE RECEIVED 1394	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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